

Section 1

Arizona Department of Financial Institutions

Collection Agency License Renewal Application

License Renewal Period 01/01/2009 to 12/31/2009



Read Carefully and Make Note

This information affects the accurate and timely renewing of your license.

As long as a license was issued on or before 12/31/2008, the license must be renewed.

Time Sensitive: Arizona Revised Statutes Section 32-1025 requires that your renewal package be received in our office on or before January 1, and does not provide for an extension of time to file your renewal. The license renewal must be received at the Department no later than January 1, 2009. Because the renewal deadline is during the holiday season please take steps to insure your renewal is submitted timely. Note: a renewal application must be submitted only for your principal place of business office and all Arizona branch offices.

Complete all questions on the renewal application and financial statement they refer to the principal place of business whether located in-state or out-of-state. If your principal place of business is located in Arizona, remember to also renew all operating branch locations.

Pre-Renewal Requirements The licensee is required to notify this department at the time changes are being made regarding the license (e.g. licensee name, address, office closure, bond, change of control, change of the top five officers/partners/directors, change in the Active Manager). Your renewal is not complete until these changes have been processed by this Department. Note: If the licensee waits until renewal time to notify the department of any changes regarding their license, a civil money penalty may be assessed.

How To Make Changes To Your License: For instructions on how to make changes to your current license visit our website at azdfi.gov click Licensing then click Changing your License. To acquire the necessary forms download the Collection Agency Application.

Financial Statement: A.R.S. Section 32-1025 requires that a current financial statement (not older than six months), accompany the renewal application. If you are unable to file your financial statement with the renewal package, you may include a letter requesting an extension of time to submit the financial statement (good cause for extension must be documented). If the extension is granted, the financial statement must be submitted not later than March 1, 2008.

Download Now: www.cc.state.az.us to download Certificate of Good Standing Licensees must provide, with their renewal, a "current" (November 1st, 2008 or newer) Certificate of Good Standing from the ARIZONA Corporation Commission ("ACC"). If the licensee is domiciled in another state you must also provide a "current" (November 1st, 2008 or newer) Certificate of Good Standing from the state you are incorporated.

To verify that this department received your renewal, check with your courier or the mail delivery service that vou used. AND/OR Check with the bank to see if the check cleared the account.

To Verify WHEN your renewal has been renewed by the Department, visit our website at azfdi.gov, click List of Licensees click Collection Agency then do Ctrl + F to activate the find feature, enter the licensee name or license number. Our website updates nightly. Licensees only appear on our website if their status is ACTIVE. Your license has renewed if 1/31/2010 appears in the Expires date field. Renew early to allow for renewal processing time. New license certificates are issued the first of February.

Renewal Contact: Your Active Manager and/or the President will be the parties that will be directly advised by this Department of any and all of the renewal issues. Therefore, if any of the licensee's concerned individuals have any questions about how the renewal is progressing or why it has not been renewed, contact these individuals for an update.

Arizona Administrative Code R20-4-1520 (B) requires a collection agency to maintain a record of fictitious names used by each of its debt collector(s). A copy of the record must also be filed with the Department on July 1 and December 31 of each year.

2910 North 44 th Street, Suite 310	Form:	CA-REN-001
Phoenix, AZ 85018	Revised	11/10/2008



Arizona Department of Financial Institutions Collection Agency License Renewal App

Collection Agency License Renewal Application License Renewal Period 01/01/2009 to 12/31/2009



Section 2

Legibly Print Or Type All Information - Do not leave any blanks
There must be an answer provided for each inquiry therefore, if not applicable use "None" or "N/A"
Do not add attachments in lieu of completing our form.

1. Principal Primary License	ed Location:				
Company Name:					License #:
Doing Business As:					CA
E-Mail Address:					
Physical Address:					
City:				State:	Zip Code:
Telephone Number:	FAX Number:		Tax ID Number:		Fiscal Year End
2. Mailing Address if differe	nt from the above				IVIO 7 D/XI
Physical Address:	int iroin the above	•	E-Mail Address:		
City:	State:	Zip Code:	Telephone Number:	FAX	Number:
3. Corporate Address if diff	erent from numbe	r 1 above:			
Company Name:					
Physical Address:			E-Mail Address:		
City:				State:	Zip Code:
Telephone Number:			FAX Number:		
4. Current Ownership. If ap	onlicant is owned by	an entity provide	the name of the entity and	its corporate financi	ials If owned by individuals
provide the names and percer	tage owned of each p		ional owners on a separate s		
Nan	ne		Title		% Owner
		I		Ownership Must total	1100% %
5. Control. List all persons wh	o have the power to	vote more than			
Name			Title	% of outsta	anding voting shares
6. List the top 5 officers and	d directors of the I	icensee:		l	
Officer Title Name			Direct Business Telephone Number	Date Assumed Office	Years of collection experience
Officer Title Name b.			Direct Business Telephone Number	Date Assumed Office	Years of collection experience
Officer Title Name			Direct Business Telephone Number	Date Assumed Office	Years of collection experience
Officer Title Name			Direct Business Telephone Number	Date Assumed Office	Years of collection experience
Officer Title Name			Direct Business Telephone Number	Date Assumed Office	Years of collection experience

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Section 2

Bond Calculation:

7.	<u> </u>		yee who has principal acti	ve manage	ement auth	ority ove	r the busines	of the licens	ee in tl	nis state)
Title	:	Name								
Addr	ess:			Ci	ty:		State:	Zip	Code:	
Direc	ct Telephone Number & Extension:		FAX Number:	I		Ema	ail Address			
8.	Since the license was is partner thereof;	•	o 12/31/08) or since the ly of these questions you must		•	,		•	officer	, director, AM or
a.	been convicted of a criminal offer	nse other than minor	traffic violations?							☐ Yes ☐ No
b.	been sued in a civil action?									☐ Yes ☐ No
c. d.	had a final judgment issued agair filed bankruptcy?	nst him/her?							-	☐ Yes ☐ No ☐ Yes ☐ No
e. had an order entered against him/her been indicted, been informed against or found guilty by an administrative agency of this state, the Federal government or any other state or territory of the United States?							al	☐ Yes ☐ No		
9.	List all occupational or have been refused, denic (01/01/2008 to 12/31/2008	ed, revoked or	suspended by any S	State or	the Fede	ral Gov	ernment s	ince the li	cens	e was issued
a. N	ame on License	,	,	,	Type of Lice			Issue Date		Expiration Date
								MO/DAY/Y	EAR	MO/DAY/YEAR
Nam	e of Licensing Agency					Type of A	ction			Date of Action MO/DAY/YEAR
b. N	ame on License				Type of Licer	nse		Issue Date		Expiration Date
								MO/DAY/Y	EAR	MO/DAY/YEAR
Name	e of Licensing Agency					Type of A	ction			Date of Action
c N	ame on License				Type of Licer	200		Issue Date		Expiration Date
C. IN	arrie on License				Type of Lice	156		MO/DAY/Y		MO/DAY/YEAR
Name	e of Licensing Agency			l.		Type of A	ction			Date of Action
					T ():			T. 5.		MO/DAY/YEAR
d N	ame on License				Type of Licer	nse		Issue Date		Expiration Date
Name	e of Licensing Agency					Type of A	ction	WODATT	EAR	Date of Action
10	Branch(oc) Ponowing in	Arizona Only	Do not count on list the Daineire		D					
a.	Branch(es) Renewing in Address	Alizona Only.	Do not count or list the Principa	II Location #	as a branch.			License #:		
								CABR-		
	City:		State: AZ	Zip Code	:		Telephone	#		
b.	Address		AL					License #:		
				T			1	CABR-		
	City:		State: AZ	Zip Code	:		Telephone	"		
Sec orec	NDING REQUIREMENT tion 32-1022 mandates ceding year. Please rev ome Base	that the amoview the follow	ount of the bond k	be base tem 11	d on th	e licer	nsee's gr	oss annua		
\$25 \$50	over \$250,000 0,001 to \$500,000 0,001 to \$750,000 0,001 and over		\$10,000 \$15,000 \$25,000 \$35,000							
amo		ay need to be in nt surety bond. I. All surety bo vides for a cash alternat	ncreased. If the amou The original rider m	unt of reconust reflain an ef	quired covect the named fective departments of the properties of t	verage lew am ate of r	has increas ount of rec not later th it in lieu of a bon	ed, contact quired cov an Februar d and your requir	your erage y 1, 2	bonding agent e <u>and</u> must be 2008.

a. Gross annual income as reported on page 4, line 24 of the financial statement enclosed:
 b. Bond amount required:
 NOTE: If you have a certificate of deposit in lieu of bond and your required bond amount listed in item "b" above has changed, contact the

Department to obtain an assignment form. Any new surety bonds, or bond riders must list the exact licensee name as the insured. Please refer to your current license and Items 1 and 2 of the renewal form to ensure the correct name is listed on the surety bond or rider, including the trade name if applicable.

NOTE: If you have a certificate of deposit in fleu of bond and your required bond amount listed in Item "b" above has changed, contact the Licensing Division at 602-255-4421.

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Form:

Revised

CA-REN-001

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Section 2

2910 North 44th Street, Suite 310

Phoenix, AZ 85018

a.			itten explanation on sep	arate sneet.		☐ Yes ☐ No	
	, , , , , , , , , , , , , , , , , , , ,						
 b. If no above, have you enclosed a surety bond rider adjusting the bond showing the Arizona Revised Statute required amount? c. Has bond of not less than ten thousand dollars as required under A.R.S. Sections 32-1021 and 32-1022 been maintained in full force and effect at 						☐ Yes ☐ No	
all times during the reporting period?						☐ Yes ☐ No	
12.	General Information: If. YES to any of the f	<u> </u>					
a.	Has applicant aided or abetted, directly or indirectly or in of this article?	ndirectly, any person, persons or	organizations in evading or v	olating any of the pr	ovisions	☐ Yes ☐ No	
b.	Have any lawsuits been filed against the collection agen collection agency?	cy during the reporting period w	hich related in any manner to	the licensee's busine	ess as a	☐ Yes ☐ No	
C.	Have there been any changes during the reporting perio conducted?			s at which the busine	ess is	☐ Yes ☐ No	
If N	IO to any of the following provide a writte	n explanation on separ	ate sheet			ı	
d.	If yes, to "c" above, have those changes been filed with				.1	☐ Yes ☐ No	
е.	Has applicant rendered an account of and paid to all clie as agreed to between applicant and client within thirty do	ays from the last day of the mon	th in which collections have be	een made?		☐ Yes ☐ No	
f. Has applicant deposited with a local depository all money collected by him and due and owing clients, and kept such money deposited until remitted to such clients?					☐ Yes ☐ No		
g.	Has applicant kept a record of money collected and the	remittance of such money?				☐ Yes ☐ No	
	Organizational Ownership Chart: (including		ies)				
Have	e you included an organizational chart? Yes Not	applicable					
	Arizona – Certificate of Good Standing:						
	e you attached the Certificate of Good Standing with this res $\ \ \square$ No	enewal?					
	State of Domicile - Certificate of Good St						
	e you attached the Certificate of Good Standing with this res No If No, provide date when this departme		e renewal application because	you are waiting for	this Certificate		
	•	•					
Nam	Accounting Firm that audits your books an	id records.					
Addr	ess:		City:	State:	Zip Code:		
Cont	act Person	Telephone Number:		FAX Number:			
	Renewal Fees:				Fees		
	cipal Primary Licensed Location: See #1 on firs		T-1-1-1	V #000 00		\$600.00	
Cur	Current number of branch locations renewing in Arizona ONLY: Total # X \$200.00 = \$						
Total All Lines							
	rent number of branch locations renewing in A			Total All Lin	es		
	Tent number of branch locations renewing in A		amount entered here	Total All Lin	es		
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or stateme	Pay the submit are all the	amount entered here	Total All Lingall on one checomplete, Ac	es ck \$	ttached &	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing:	Pay the submit are all the	amount entered here	Total All Lingall on one checomplete, Ac	es ck \$	ttached &	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement	Pay the submit are all the	amount entered here	Total All Lingall on one checomplete, Ac	es ck \$	ttached &	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report	Pay the submit are all the ents AND if not applical	amount entered here following items Code with "NONE" or "N	Total All Lingall on one checkers Complete, Ac	es ck \$ curate, A		
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office	Pay the submit are all the ents AND if not applical r of the Licensee & is in	amount entered here following items Code with "NONE" or "Note to the code and include the cod	Total All Lingall on one checkers Complete, Ac	es ck \$ curate, A		
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report	Pay the submit are all the ents AND if not applical r of the Licensee & is it and or to amend if need	amount entered here following items Coole with "NONE" or "Notarized and included	Total All Lingall on one checkers Complete, Ac	es ck \$ curate, A	p	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office Made and kept copies for your records a	Pay the submit are all the ents AND if not applical r of the Licensee & is it and or to amend if need	amount entered here following items Coole with "NONE" or "Notarized and included	Total All Lingall on one checkers Complete, Ac	es ck \$ curate, A	p	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office of Made and kept copies for your records at Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Origina	Pay the submit are all the ents AND if not applical r of the Licensee & is it and or to amend if need Check for ONLY this	amount entered here following items Coole with "NONE" or "Notarized and included Renewal Application in this package	Total All Lingall on one checked all on one checked all on one checked all one	es ck \$ curate, A	p	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office Made and kept copies for your records at Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Original Arizona Statement of Citizenship and Alien Statement of Citizenship and Alien Statement.	Pay the submit are all the ents AND if not applical r of the Licensee & is it and or to amend if need Check for ONLY this	amount entered here following items Coole with "NONE" or "Notarized and included Renewal Application in this package	Total All Lingall on one checked all on one checked all on one checked all one	es ck \$ curate, A	p	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office Made and kept copies for your records at Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Origina Arizona Statement of Citizenship and Alien Son if applicable, the following:	Pay the submit are all the ents AND if not applical or of the Licensee & is in and or to amend if need Check for ONLY this I Renewal Application Status for State Public Be	amount entered here following items Coole with "NONE" or "Notarized and included Renewal Application in this package nefits – "For sole propri	Total All Lingall on one checked all on one checked all on one checked all one	es ck \$ curate, A seal/stam	p amount of	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office Made and kept copies for your records a Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Origina Arizona Statement of Citizenship and Alien S D if applicable, the following:	Pay the submit are all the ents AND if not applical or of the Licensee & is in and or to amend if need Check for ONLY this I Renewal Application Status for State Public Be	amount entered here following items Coole with "NONE" or "Notarized and included Renewal Application in this package nefits – "For sole propri	Total All Lingall on one checked all on one checked all on one checked all one	es ck \$ curate, A seal/stam	p amount of	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona — Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office Made and kept copies for your records at Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Origina Arizona Statement of Citizenship and Alien Son Dif applicable, the following: Properly labeled all attachments to correctly disposition documents)	Pay the submit are all the ents AND if not applical or of the Licensee & is in and or to amend if need Check for ONLY this I Renewal Application Status for State Public Be	amount entered here following items Coole with "NONE" or "Notarized and included Renewal Application in this package nefits – "For sole propri	Total All Lingall on one checked all on one checked all on one checked all one	es ck \$ curate, A seal/stam	p amount of	
	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office Made and kept copies for your records a Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Origina Arizona Statement of Citizenship and Alien S D if applicable, the following: Properly labeled all attachments to correctly disposition documents) Appropriate bond coverage	Pay the submit are all the ents AND if not applical or of the Licensee & is in and or to amend if need Check for ONLY this I Renewal Application Status for State Public Be espond with the application	amount entered here following items Coole with "NONE" or "Notarized and included Renewal Application in this package nefits – "For sole propri	Total All Lingall on one checked all on one checked all on one checked all one	es ck \$ curate, A seal/stam	p amount of	
AN Gina	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona — Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Office Made and kept copies for your records at Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Origina Arizona Statement of Citizenship and Alien Son Dif applicable, the following: Properly labeled all attachments to correctly disposition documents)	Pay the submit are all the ents AND if not applical or of the Licensee & is in and or to amend if need Check for ONLY this I Renewal Application Status for State Public Be espond with the application and the standing:	amount entered here following items of the with "NONE" or "Notarized and included Renewal Application in this package nefits – "For sole propriable application numbers."	Total All Line all on one check all on one check all on one check all on one check all	es ck \$ curate, A seal/stam	p amount of	
AN fina	Before packaging this renewal to Enclosed? Legibly print or type all answers Answer ALL blanks, questions or statemed Arizona – Certificate of Good Standing: Financial Statement Fictitious Names Report Application 4 th page signed by an Officer Made and kept copies for your records at Enclose all prescribed fee(s) on ONE renewal (all licensing changes) Enclosing ONLY this Licensee's Origina Arizona Statement of Citizenship and Alien Son if applicable, the following: Properly labeled all attachments to correct of the control	Pay the submit are all the ents AND if not applical or of the Licensee & is in and or to amend if need Check for ONLY this I Renewal Application Status for State Public Be espond with the application and the application of the control of the application of the	amount entered here following items Coole with "NONE" or "Notarized and included Renewal Application in this package nefits – "For sole propriable application numbers able application numbers and the subsidiary with subsidiary and the subsidiary with subsidiary ampany with subsidiary and the subsidiary with subsidiary ampany with subsidiary ampany with subsidiary subsidiary ampany with subsidiary subsidiary ampany with subsidiary subsid	Total All Lingall on one check all on one check all on one check all on one check all	es ck \$ curate, A seal/stam	p amount of	



Collection Agency License Renewal Application License Renewal Period 01/01/2009 to 12/31/2009



Section 2

19. License Compliance Officer to whom inquiries on deficient renewal application can be directed.

le:	E-Mail Address:		
FAX N	lumber:		
•	City:	State:	Zip Code:
le		FAX Number:	FAX Number:

20. AFFIDAVIT: Signing Officer must have previously submitted a personal history statement and fingerprint card to the department to be eligible to sign this Affidavit. If you are not certain, than have the officer who signs this affidavit submit both the above two items along with a \$24 fingerprint processing fee. To acquire the necessary forms from our webpage at azdfi.gov click <u>Licensing</u> download the <u>Collection Agency Application</u> and order the fingerprint card from this location.

Affidavit - Must be s	signed by an officer of the Licensee and notarized.
STATE OF	
COUNTY OF	SS
I (print signing officers' name)	being duly sworn, depose and say that I have signed the foregoing
application as (print officers' title))	of the above named applicant, having full authority to sign such application
in said capacity; that I have read said application	on and that the information contained therein is true.
Date	(Officers' Signature)
Subscribed and sworn to before me this	day of 20
My Commission Expires	(Notary Public Signature)

SUBMIT TO:

Checks Made payable to: Arizona Department of Financial Institutions or AZDFI

And Remit To: Attention: Licensing Division 2910 N. 44th Street, Suite 310

Phoenix, AZ 85018



Phoenix, AZ 85018

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Revised

11/10/2008

This report must be filed even if fictitious names are not used.

If no fictitious names are used, enter "N/A" and include the form with your renewal application. If more space is needed, print this page as many times as needed and staple them all together.

1. Principal Primary Licensed	Location: Complete as you did on	page 1 of your re	enewal.		
Company Name:				Lice CA	nse #: . -
Doing Business As:				·	
Address:		City:	State:	Zip	Code:
2. Do any of your employees u	ıse fictitious names? ☐Yes		complete the	fictitious na	ame column also:
True name of debt collector.	Fictitious name used other than true name	Date used From To	True ph	ysical home address of	e address and debt collector.
-iled with the Department	for the December 31 st report	period.			
Date		Signature of	Licensee o	r Active N	Manager
2910 North 44 th Street, Suite 310				Form:	CA-REN-001



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Financial statement for the period beginning (m/d/y) ____ / __ and ending (m/d/y) _ / ___ (must be within the last six months) is hereby submitted.

ending (m/d/y) // // (must be within	n the last six n	nonths) IS Nered	y submitted.	
1. Principal Primary Licensed Location: Complete as you did	on page 1 of you	r renewal.		
Company Name:			License #:	
Doing Business As:				
Address:	City:	State:	Zip Code:	
Direct Telephone Number & Extension:	FAX Number:		,	
Information on the financial statement n	nust be fo	r the collectio	n agency only	/.
Do not include personal items or the consolidation of other	businesses.			

I. BALANCE SHEET (As of the end of the reporting period). (A) ASSETS

Dollars

NOTE:

Line 10 Must Equal Line 25 Line 24 Must Be Positive

Line 1(a) Must be Greater Than or Equal to Line 12(a)

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Dollars



(B) LIABILITIES

	11. Notes Paya	able	
	12. (a) Account	ts Payable – Client Trust	
	12. (b) Account	s Payable – Other	
	13. Accrued Ta	ixes	
	14. Accrued Int	erest	
	15. Subordinate	ed Notes & Debentures	
	16. Due to affili	ates	
	17. Other liabili	ties (Part VI, line 7)	
	18. TOTAL LIA	BILITIES (sum of lines 11 thru 17)	
(C)	NET WORTH		
19.	Preferred stock	Number of shares outstanding _	
		Par value per share _	
20.	Common stock	Number of shares authorized	
		Number of shares outstanding _	
		Par value per share _	
21.	Additional paid-	in capital	
22.	Retained earnin	as (deficit)	

25. TOTAL LIABILITIES & NET WORTH (sum of lines 18 & 24)

24. TOTAL NET WORTH (sum of lines 19 thru 23)

II. STATEMENT OF CHANGE IN NET WORTH/EQUITY

	Capital Stock	Additional Paid-in Capital	Retained Earnings (Deficit)	Treasury / Stock	Total Equity
Balance, Beginning					\$
Dividends/Distributions					
Net Income (Loss**)					**
Other					
Balance, Ending*					*\$

NOTE:

23. Treasury Stock

- * Ending balance must agree with Line 24 Of Section I (above).
- ** Net Income must agree with page 4, Line 23

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III. SCHEDULE OF REAL ESTATE OWNED

Description & Location	Title & Owner	Cost	Appraisal Value	Mortgages	Tax Value	Insurance
1.						
2.			\$	\$	\$	\$
3.			\$	\$	\$	\$
4.			\$	\$	\$	\$
5 Total Real Estate Owned		\$				

IV. SCHEDULE OF STOCKS, BOND	S AND OTHER INVES	STMENTS	
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
1.	\$	5.	\$
2.	\$	6.	\$
3.	\$	7.	\$
4.	\$	8.	\$

Total Stocks, Bonds and Other
 Investments

\$

V. SCHEDULE OF OTHER ASSETS

DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
1.	\$	5.	\$
2.	\$	6.	\$
3.	\$	7.	\$
4.	\$	8.	\$
		9. Total Other Assets	\$

VI. SCHEDULE OF OTHER LIABILITIES

Name of Creditor	Amount	Type of Obligation	Description of of Security	Amount of Security
1.	\$			\$
2.	\$			\$
3.	\$			\$
4.	\$			\$
5.	\$			\$
6.	\$			\$
7. Total Other Liabilities	\$			

VII. SCHEDULE OF CONTINGENT LIABILITIES

Upon Notes or Accounts Receivable Discounted Sold, or Assigned	\$
2. As Guarantor for Other on Notes Bonds Contracts, etc.	

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Section 4

3. Any Other Contingent Liability		
	Total Contingent Lia	abilities \$
VIII. STATEMENT OF INCOME AND EXPENSES		
1. Income		
2. Income from Collections	\$	
3. Profit (or loss) on investments	\$	
4. Income from investments	\$	
5. Other Income (Part XI (A), Page 5)	\$	
6. Total Income (sum of lines 2 thru 5)		\$
7. Expenses		
8. Salaries	\$	
9. Accounting Services	\$	
10. FICA taxes	\$	
11. Other taxes	\$	
12. Supplies	\$	
13. Depreciation	\$	
14. Insurance & bonds	\$	
15. Advertising	\$	
16. Interest	\$	
17. License & examination fees	\$	
18. Office expenses	\$	
19. Other expenses (Part IX (B), Page 5)	\$	
20. Total Expenses (sum of lines 8 thru 19)		\$
21. Profit (Loss) (line 6 less line 20)		\$
22. Income Taxes		\$
23. Net Profit (Loss) (line 21 less line 22) **		\$
24. Arizona Gross Annual Income Include in line 6 (above)***		\$

NOTE:

Line 23 must agree with Part II, page 2 of Financial Statement.

***This figure to be used to calculate the amount of your required surety bond.

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Collection Agency License Renewal Application License Renewal Period 01/01/2009 to 12/31/2009



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		o"·			
	Detail all items that exceed 10% of total "Other Incom	С.			
		-			
		-			
		_			
		-			
	All other income	_			
	Total Other Income				
(B)	SCHEDULE OF OTHER EXPENSES (Part VIII, Line	19):			
	Detail all items that exceed 10% of total "Other Expen	ises":			
		_			
		_			
		_			
		_			
	All other currences	-			
	All other expenses Total Other Expenses				
Date:	Total Other Expenses				
_	 ed by:		Phone #:		
	VERIFIC ust be signed by an officer o				
C1-1	ace no digition ny art difficol d	tne tr	Licensee a	and no	torized
State o	f)	tne tne	Licensee a	and no	torized
	•	tne	Licensee a	and no	torized
County	of) ss				
County I, (namedepose financia	f) ss of e of person signing financial statement) e and say that I have personal knowledge of statement and everything contained therein lief and that I have signed this financial statement above named applicant/licensee, having full above named applicant/licensee, having full and the signed this financial statement.	of the r	matters contained and correct to the	being in and at ne best of i	duly sworn, tached to this my knowledge
County I, (namdepose financia and belof the a	f) ss of e of person signing financial statement) e and say that I have personal knowledge of statement and everything contained therein lief and that I have signed this financial statement above named applicant/licensee, having full above named applicant/licensee, having full and the signed this financial statement.	of the r	matters contained e and correct to th (official capacity) ty to sign such fir	being in and at ne best of i	duly sworn, tached to this my knowledge
I, (namedepose financia and belof the a capacit	of) ss of) e of person signing financial statement) e and say that I have personal knowledge of statement and everything contained therein lief and that I have signed this financial statement above named applicant/licensee, having full by.	of the r n is true nent as authori	matters contained and correct to the contained (official capacity) ty to sign such fire Signature	being in and at ne best of i	duly sworn, tached to this my knowledge
I, (namedepose financia and belof the a capacit	f) ss of e of person signing financial statement) e and say that I have personal knowledge of statement and everything contained therein lief and that I have signed this financial statement above named applicant/licensee, having full above named applicant/licensee, having full and the signed this financial statement.	of the r n is true nent as authori	matters contained and correct to the contained (official capacity) ty to sign such fire Signature	being in and at ne best of i	duly sworn, tached to this my knowledge
I, (namedepose financia and belof the a capacit	of) ss of) e of person signing financial statement) e and say that I have personal knowledge of statement and everything contained therein lief and that I have signed this financial statement above named applicant/licensee, having full by.	of the r n is true nent as authori	matters contained and correct to the conficial capacity) ty to sign such fire Signature	being in and at ne best of i	duly sworn, tached to this my knowledge
I, (namedepose financia and belof the a capacit	of) ss of e of person signing financial statement) e and say that I have personal knowledge of all statement and everything contained thereing ief and that I have signed this financial statement above named applicant/licensee, having full sy. ibed and sworn to before me this day	of the r n is true nent as authori	matters contained and correct to the contained (official capacity) ty to sign such fire Signature	being in and at ne best of i	duly sworn, tached to this my knowledge
I, (nam depose financia and belof the a capacit	of) ss of e of person signing financial statement) e and say that I have personal knowledge of all statement and everything contained thereing ief and that I have signed this financial statement above named applicant/licensee, having full sy. ibed and sworn to before me this day	of the r n is true nent as authori	matters contained and correct to the conficial capacity) ty to sign such fire Signature	being in and at ne best of i	duly sworn, tached to this my knowledge

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Arizona Department of Financial Institutions

ARIZONA STATEMENT OF CITIZENSHIP AND ALIEN STATUS FOR STATE PUBLIC BENEFITS



Section 5

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Form 1: LONG FORM APPLICANT STATEMENT (revised)
REQUIRING SUBMISSION OF DOCUMENTATION OF STATUS

ARIZONA STATEMENT OF CITIZENSHIP AND ALIEN STATUS FOR STATE PUBLIC BENEFITS

Professional License and Commercial License

Arizona Department of Financial Institutions

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 1-501 requires, in general, that a person applying for a license must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.

SECTION I — APPLICANT INFORMATION			
APPLICANT'S NAME (Print or type) DATE			
TYPE OF APPLICATION (check one) INITIAL APPLICATION RENEWAL			
TYPE OF LICENSE			
SECTION II — CITIZENSHIP OR NATIONAL STATUS DECLARATION			
Directions: Attach a legible copy of the <u>front</u> , and the <u>back (if any)</u> , of a document from the attached List A or other document that demonstrates U.S. citizenship or nationality. Name of document provided:			
A. Are you a citizen or national of the United States? (check one) Yes No			
B. If the answer is "Yes," where were you born? List city, state (or equivalent), and country.			
City State (or equivalent) Country or Territory			
State (of equivalent) Country of Territory			
If you are a citizen or national of the United States, go to Section IV. If you are <u>not</u> a citizen or national of the United States, please complete Sections III and IV.			
SECTION III — ALIEN STATUS DECLARATION			
Directions: To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of the front, and the back (if any), of a document from the attached List B or other document that evidences your status. A.R.S. § 1-501. Name of document provided:			
"Qualified Alien" Status (8 U.S.C.§§ 1621(a)(1), -1641(b) and (c))			
1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA).			

Form:

Revised

CA-REN-002

08/11/2008

Arizona Department of Financial Institutions ARIZONA STATEMENT OF CITIZ

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□ 2.	An alien who is granted asylum under Section 208 of the INA.	
□ 3.	A refugee admitted to the United States under Section 207 of the INA	
□ 4.	An alien paroled into the United States for <u>at least one year</u> under Section 212(d)(5) of the INA.	
☐ 5.	An alien whose deportation is being withheld under Section 243(h) of the INA.	
□ 6.	An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.	
	An alien who is a Cuban and Haitian entrant (as defined in section 501(e) of the Refugee Education to eAct of 1980).	
	An alien who is, or whose child or child's parent is a "battered alien" or an alien subjected to extreme the United States.	
Nonimm	igrant Status (8 U.S.C.§ 1621(a)(2))	
	A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. § 1101 et seq.] Nonimmigrants are who have temporary status for a specific purpose. See 8 U.S.C. § 1101(a)(15).	
Alien Pa	roled into the United States For Less Than One Year (8 U.S.C.§ 1621(a)(3))	
☐ 10.	An alien paroled into the United States for <u>less than one year</u> under Section 212(d)(5) of the INA	
Other Pe	ersons (8 U.S.C.§ 1621(c)(2)(A) and (C))	
☐ 11.	A nonimmigrant whose visa for entry is related to employment in the United States, or	
☐ 12.	A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 <i>et seq.</i>];	
□ 13.	A foreign national not physically present in the United States.	
Otherwi	se Lawfully Present (A.R.S. § 1-501)	
☐ 14.	A person not described in categories 1–13 who is otherwise lawfully present in the United States. PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C.§ 1621(a).	
SECTION IV — DECLARATION		
All applicants must complete this section. I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.		
APPLICA	ANT'S SIGNATURE TODAY'S DATE	
Attachm 11/08/07	ent: Lists A and B Evidence of U.S. Citizenship, U.S National Status, or Alien Status, 81662	

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Attachment to Form 1 Applicant Statement

EVIDENCE OF U.S. CITIZENSHIP, U.S NATIONAL STATUS, OR ALIEN STATUS

LIST A: U.S. CITIZEN OR U.S. NATIONAL

Note: In this List, the term "Service" refers to the U.S. Citizenship and Immigration Service, formerly, the U.S. Immigration and Naturalization Service (INS).

[Source: Proposed Rules, Verification of Eligibility for Public Benefits, 8 CFR § 104.23; 63 FR 41662-01 August 4, 1998); and Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

Evidence showing U.S. citizen or U.S. national status includes the following: a. Primary Evidence:

- (1) A birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
- (2) United States passport;
- (3) Report of birth abroad of a U.S. citizen (FS-240) (issued by the Department of State to U.S. citizens);
- (4) Certificate of Birth (FS-545) (issued by a foreign service post) or Certification of Report of Birth (DS-1350), copies of which are available from the Department of State;
- (5) Form N-561, Certificate of Citizenship;
- (6) Form I-197, United States Citizen Identification Card (issued by the Service until April 7, 1983 to U.S. citizens living near the Canadian or Mexican border who needed it for frequent border crossings) (formerly Form I-179, last issued in February 1974);
- (7) Form I-873 (or prior versions), Northern Marianas Card (issued by the Service to a collectively naturalized U.S. citizen who was born in the Northern Mariana Islands before November 3, 1986);
- (8) Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen (given to an individual born outside the United States who derives citizenship through a parent but does not have an FS-240, FS-545, or DS-1350); or
- (9) Form I-872 (or prior versions), American Indian Card with a classification code "KIC" and a statement on the back identifying the bearer as a U.S. citizen (issued by the Service to U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border).

[Source: Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

b. Secondary Evidence

If the applicant cannot present one of the documents listed in (a) above, the following may be relied upon to establish U.S. citizenship or U.S. national status:

- (1) Religious record recorded in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction) within three 3 months after birth showing that the birth occurred in such jurisdiction and the date of birth or the individual's age at the time the record was made:
- (2) Evidence of civil service employment by the U.S. government before June 1, 1976;
- (3) Early school records (preferably from the first school) showing the date of admission to the school, the applicant's date and U.S. place of birth, and the name(s) and place(s) of birth of the applicant's parents(s);
- (4) Census record showing name, U.S. nationality or a U.S. place of birth, and applicant's date of birth or age;

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- (5) Adoption finalization papers showing the applicant's name and place of birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction), or, when the adoption is not finalized and the state or other U.S. jurisdiction listed above will not release a birth certificate prior to final adoption, a statement from a State-or jurisdiction-approved adoption agency showing the applicant's name and place of birth in one of such jurisdictions, and stating that the source of the information is an original birth certificate;
- (6) Any other document that establishes a U.S. place of birth or otherwise indicates U.S. nationality (e.g., a contemporaneous hospital record of birth in that hospital in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);

c. Collective Naturalization

If the applicant cannot present one of the documents listed in (a) or (b) above, the following will establish U.S. citizenship for collectively naturalized individuals:

Puerto Rico:

- Evidence of birth in Puerto Rico on or after April 11, 1899 and the applicant's statement that he or she was residing in the U.S., a U.S. possession or Puerto Rico on January 13, 1941; or
- Evidence that the applicant was a Puerto Rican citizen and the applicant's statement that he or she was residing in Puerto Rico on March 1, 1917 and that he or she did not take an oath of allegiance to Spain.

U.S. Virgin Islands:

- Evidence of birth in the U.S. Virgin Islands, and the applicant's statement of residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927;
- The applicant's statement indicating resident in the U.S. Virgin Islands as a Danish citizen on January 17, 1917 and residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927, and that he or she did not make a declaration to maintain Danish citizenship; or
- Evidence of birth in the U.S. Virgin Islands and the applicant's statement indicating residence in the U.S., a U.S. possession or territory or the Canal Zone on June 28, 1932.

Northern Mariana Islands (NMI) (formerly part of the Trust Territory of the Pacific Islands (TTPI)):

- Evidence of birth in the NMI, TTPI citizenship and residence in the NMI, the U.S., or a U.S. territory or possession on November 3, 1986 (NMI local time) and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time);
- Evidence of TTPI citizenship, continuous residence in the NMI since before November 3, 1981 (NMI local time), voter registration prior to January 1, 1975 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time); or
- Evidence of continuous domicile in the NMI since before January 1, 1974 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time). Note: If a person entered the NMI as a nonimmigrant and lived in the NMI since January 1, 1974, this does not constitute continuous domicile and the individual is not a U.S. citizen

d. Derivative Citizenship

If the applicant cannot present one of the documents listed in a or b above, the following may be used to make a determination of derivative U.S. citizenship:

Applicant born abroad to two U.S. citizen parents: Evidence of the U.S. citizenship of the parents and the relationship of the applicant to the parents, and evidence that at least one parent resided in the U.S. or an outlying possession prior to the applicant's birth.

Applicant born abroad to a U.S. citizen parent and a U.S. non-citizen national parent: Evidence that one parent is a U.S. citizen and that the other is a U.S. non-citizen national, evidence of the relationship of the applicant to the U.S. citizen parent, and evidence that the U.S. citizen parent resided in the U.S., a U.S. possession, American Samoa or Swain's Island for a period of at least one year prior to the applicant's birth.

Applicant born out of wedlock abroad to a U.S. citizen mother: - Evidence of the U.S. citizenship of the mother, evidence of the relationship to the applicant and, for births on or before December 24, 1952, evidence that the

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mother resided in the U.S. prior to the applicant's birth or, for births after December 24, 1952, evidence that the mother had resided, prior to the child's birth, in the U.S. or a U.S. possession for a period of one year.

Applicant born in the Canal Zone or the Republic of Panama:

- A birth certificate showing birth in the Canal Zone on or after February 26, 1904 and before October 1, 1979 and evidence that one parent was a U.S. citizen at the time of the applicant's birth; or
- A birth certificate showing birth in the Republic of Panama on or after February 26, 1904 and before October 1, 1979 and evidence that at least one parent was a U.S. citizen and employed by the U.S. government or the Panama Railroad Company or its successor in title.

In all other situations in which an applicant claims to have a U.S. citizen parent and an alien parent, or claims to fall within one of the above categories, but is unable to present the listed documentation:

- If the applicant is in the U.S., the applicant should contact the local U.S. Citizenship and Immigration Service office for determination of U.S. citizenship;
- If the applicant is outside the U.S., the applicant should contact the State Department for a U.S. citizenship determination.

e. Adoption of Foreign-Born Child by U.S. Citizen

- If the birth certificate shows a foreign place of birth and the applicant cannot be determined to be a naturalized citizen under any of the above criteria, obtain other evidence of U.S. citizenship;
- Because foreign-born adopted children do not automatically acquire U.S. citizenship by virtue of adoption by U.S. citizens, the applicant should contact the local U.S. Citizenship and Immigration Service office for a determination of U.S. citizenship, if the applicant provides no evidence of U.S. citizenship.

f. U.S. Citizenship By Marriage

A woman acquired U.S. citizenship through marriage to a U.S. citizen before September 22, 1922. Provide evidence of U.S. citizenship of the husband, and evidence showing the marriage occurred before September 22, 1922.

Note: If the husband was an alien at the time of the marriage, and became naturalized before September 22, 1922, the wife also acquired naturalized citizenship. If the marriage terminated, the wife maintained her U.S. citizenship if she was residing in the U.S. at that time and continued to reside in the U.S.

LIST B: QUALIFIED ALIENS, NONIMMIGRANTS, AND ALIENS PAROLED INTO U.S. FOR LESS THAN ONE YEAR

The documents listed below that are registration documents are indicated with an asterisk ("*").

a. "Qualified Aliens"

Evidence of "Qualified Alien" status includes the following:

Alien Lawfully Admitted for Permanent Residence

- *Form I-551 (Alien Registration Receipt Card, commonly known as a "green card"); or
- Unexpired Temporary I-551 stamp in foreign passport or on *I Form I-94.

Asylee

- * Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA;
- *Form I-688B (Employment Authorization Card) annotated "274a.12(a)(5)";
- * Form I-766 (Employment Authorization Document) annotated "A5";
- Grant letter from the Asylum Office of the U.S. Citizenship and Immigration Service; or
- Order of an immigration judge granting asylum.

Refugee

- * Form I-94 annotated with stamp showing admission under § 207 of the INA;
- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- * Form I-766 (Employment Authorization Document) annotated "A3"

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Alien Paroled Into the U.S. for a Least One Year

- * Form I-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)

Alien Whose Deportation or Removal Was Withheld

- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(10)";
- * Form I-766 (Employment Authorization Document) annotated "A10"; or
- Order from an immigration judge showing deportation withheld under §243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under § 241(b)(3) of the INA.

Alien Granted Conditional Entry

- * Form I-94 with stamp showing admission under §203(a)(7) of the INA;
- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- * Form I-766 (Employment Authorization Document) annotated "A3."

Cuban/Haitian Entrant

- * Form I-551 (Alien Registration Receipt Card, commonly known as a "green card") with the code CU6, CU7, or CH6:
- Unexpired temporary I-551 stamp in foreign passport or on * Form I-94 with the code CU6 or CU7; or
- Form I-94 with stamp showing parole as "Cuba/Haitian Entrant" under Section 212(d)(5) of the INA.

Alien Who Has Been Declared a Battered Alien or Alien Subjected to Extreme Cruelty

- U.S. Citizenship and Immigration Service petition and supporting documentation

b. Nonimmigrant

Evidence of "Nonimmigrant" status includes the following:

- * Form I-94 with stamp showing authorized admission as nonimmigrant

c. Alien Paroled into U.S. for Less than One Year

Evidence includes:

- * Form I-94 with stamp showing admission for less than one year under section 212(d)(5) of the INA

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